

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

Johnson, Todd

ADDRESS (number and street)

PO Box 591

Check if different
than previously
reported. (ACC)

Monroe

NC

28111

2. FEC IDENTIFICATION NUMBER ▼

C

C00613232

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

NC

09

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y
06 07 2016in the
State of

NC

(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the
State of

5. Covering Period

M M / D D / Y Y Y Y
04 01 2016

through

M M / D D / Y Y Y Y
05 18 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Baxter Ware Starnes

Signature of Treasurer

Baxter Ware Starnes

[Electronically Filed]

Date

M M / D D / Y Y Y Y
06 02 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3**
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

Johnson, Todd

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	1	6

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	8		2	0	1	6

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	35620.00	76395.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	35620.00	76395.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	82565.96	94797.38
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	82565.96	94797.38
8. Cash on Hand at Close of Reporting Period (from Line 27).....	71697.62	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	90100.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

PAGE 3 / 35

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Johnson, Todd

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y
04		01		2016

To:

M M	/	D D	/	Y Y Y Y
05		18		2016

I. RECEIPTS
COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

32410.00

71760.00

(ii) Unitemized.....

3210.00

4635.00

(iii) TOTAL of contributions from individuals ▶

35620.00

76395.00

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

0.00

0.00

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

35620.00

76395.00

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

(a) Made or Guaranteed by the Candidate.....

13000.00

20100.00

(b) All Other Loans.....

70000.00

70000.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

83000.00

90100.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)

0.00

0.00

15. OTHER RECEIPTS (Dividends, Interest, etc.)

0.00

0.00

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

118620.00

166495.00

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 35

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	82565.96	94797.38
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	82565.96	94797.38

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	35643.58
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	118620.00
25. SUBTOTAL (add Line 23 and Line 24).....	154263.58
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	82565.96
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	71697.62

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 5 OF 35

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Johnson, Todd

A. Lib Austin Full Name (Last, First, Middle Initial) Mailing Address 1030 Heather Glen Dr City Matthews State NC Zip Code 28104 FEC ID number of contributing federal political committee. C Name of Employer Self Employed Occupation Interior Decorator Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 300.00			Date of Receipt M M / D D / Y Y Y Y 04 / 18 / 2016 Transaction ID : SA11AI.4374 Amount of Each Receipt this Period 300.00 <input type="checkbox"/> Memo Item <input type="checkbox"/> Check
B. Donnie Baucom Full Name (Last, First, Middle Initial) Mailing Address 6611 Sugar & Wine Rd City Monroe State NC Zip Code 28110 FEC ID number of contributing federal political committee. C Name of Employer Self employed Occupation Door and Window Installation Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 250.00			Date of Receipt M M / D D / Y Y Y Y 04 / 18 / 2016 Transaction ID : SA11AI.4397 Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Memo Item <input type="checkbox"/> Check
C. Miriam Black Full Name (Last, First, Middle Initial) Mailing Address PO Box 745 City Wadesboro State NC Zip Code 28170 FEC ID number of contributing federal political committee. C Name of Employer South Piedmont Comm College Occupation Director of Public Safety Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 1000.00			Date of Receipt M M / D D / Y Y Y Y 05 / 14 / 2016 Transaction ID : SA11AI.4440 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Memo Item <input type="checkbox"/> Credit Card
SUBTOTAL of Receipts This Page (optional).....			1550.00
TOTAL This Period (last page this line number only).....			

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 6 OF 35

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Johnson, Todd

A. Full Name (Last, First, Middle Initial)
H Ligon Bundy

Mailing Address **PO Box 2218**

City Monroe	State NC	Zip Code 28111
-----------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Perry, Bundy, Plyler & Long	Occupation Attorney
--	-------------------------------

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 18 / 2016

Transaction ID : SA11AI.4382

Amount of Each Receipt this Period

100.00☐ Memo Item
Check

B. Full Name (Last, First, Middle Initial)
Scott Byrum

Mailing Address **3617 Lake Twitty Dr**

City Monroe	State NC	Zip Code 28110
-----------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Byrum Heating and Air	Occupation President
--	--------------------------------

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 18 / 2016

Transaction ID : SA11AI.4405

Amount of Each Receipt this Period

1000.00☐ Memo Item
Check

C. Full Name (Last, First, Middle Initial)
Ralph Carter III

Mailing Address **201 Sterling Ln**

City Laurinburg	State NC	Zip Code 28352
---------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Scotland Orthopedics	Occupation Physician
---	--------------------------------

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 18 / 2016

Transaction ID : SA11AI.4388

Amount of Each Receipt this Period

500.00☐ Memo Item
Check**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

1600.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 7 OF 35

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Johnson, ToddFull Name (Last, First, Middle Initial)
A. Zachary Cohen

Mailing Address 3520 Savannah Way

City	State	Zip Code
Monroe	NC	28110

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self EmployedOccupation
Attorney

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		16		2016

Transaction ID : SA11AI.4327

Amount of Each Receipt this Period

1000.00

☐ Memo Item
Check
Full Name (Last, First, Middle Initial)
B. Russell Cox

Mailing Address 6205 Rape Rd

City	State	Zip Code
Monroe	NC	28112

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cox Brothers FarmOccupation
Farmer

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		04		2016

Transaction ID : SA11AI.4325

Amount of Each Receipt this Period

2000.00

☐ Memo Item
Check
Full Name (Last, First, Middle Initial)
C. Tim D'Annunzio

Mailing Address 110 Fulton St

City	State	Zip Code
Raeford	NC	28376

FEC ID number of contributing
federal political committee.

C

Name of Employer
Paraclete Aviation LLCOccupation
Aviation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		09		2016

Transaction ID : SA11AI.4465

Amount of Each Receipt this Period

2700.00

☐ Memo Item
Credit Card

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5700.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 8 OF 35

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Johnson, Todd

Full Name (Last, First, Middle Initial)

Christopher Duggan

Mailing Address 6010 Hunter Lane

City

Matthews

State

NC

Zip Code

28104

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self Employed

Occupation

Attorney

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		18		2016

Transaction ID : SA11AI.4392

Amount of Each Receipt this Period

200.00

☐ Memo Item
☐ Check

Full Name (Last, First, Middle Initial)

Amanda Eaton

Mailing Address 5910 Morgan Park Dr

City

Monroe

State

NC

Zip Code

28110

FEC ID number of contributing
federal political committee.

C

Name of Employer

Carolina Inspection Services

Occupation

President

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		09		2016

Transaction ID : SA11AI.4345

Amount of Each Receipt this Period

1000.00

☐ Memo Item
☐ Check

Full Name (Last, First, Middle Initial)

Teresa Edwards

Mailing Address 1907 Hamilton Cross Rd

City

Marshville

State

NC

Zip Code

28103

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

Homemaker

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		09		2016

Transaction ID : SA11AI.4341

Amount of Each Receipt this Period

1000.00

☐ Memo Item
☐ Check

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2200.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 9 OF 35

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Johnson, Todd

Full Name (Last, First, Middle Initial)

Patrick Furr

A.

Mailing Address 1910 Waxhaw Hwy

City

Monroe

State

NC

Zip Code

28112

FEC ID number of contributing
federal political committee.

C

Name of Employer

Carolina Greens

Occupation

Turf Manager

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		18		2016

Transaction ID : SA11AI.4376

Amount of Each Receipt this Period

1500.00

☐ Memo Item
☐ Check

Full Name (Last, First, Middle Initial)

Thomas Gibson

B.

Mailing Address 315 Barker Ten Mile Rd

City

Lumberton

State

NC

Zip Code

28358

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired - Lumber Sales

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		22		2016

Transaction ID : SA11AI.4421

Amount of Each Receipt this Period

500.00

☐ Memo Item
☐ Check

Full Name (Last, First, Middle Initial)

Freddie Harrington

C.

Mailing Address 4954 Mills Rd

City

Polkton

State

NC

Zip Code

28135

FEC ID number of contributing
federal political committee.

C

Name of Employer

Wingate University

Occupation

Supervisor

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		18		2016

Transaction ID : SA11AI.4399

Amount of Each Receipt this Period

500.00

☐ Memo Item
☐ Check

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2500.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 10 OF 35

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Johnson, Todd

Full Name (Last, First, Middle Initial)

John Hendley

Mailing Address 2614 Rolling Hills Dr

City

Monroe

State

NC

Zip Code

28110

FEC ID number of contributing
federal political committee.

C

Name of Employer
Brewer-Hendley Oil CoOccupation
Petroleum Marketer

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		04		2016

Transaction ID : SA11AI.4454

Amount of Each Receipt this Period

500.00

☐ Memo Item
☐ Credit Card

Full Name (Last, First, Middle Initial)

Rachel Hinson

Mailing Address 5601 Mallard Dr S

City

Charlotte

State

NC

Zip Code

28227

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired bank teller

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		02		2016

Transaction ID : SA11AI.4434

Amount of Each Receipt this Period

300.00

☐ Memo Item
☐ Check

Full Name (Last, First, Middle Initial)

Ronald Hinson

Mailing Address 2200 Stafford St Ext

City

Monroe

State

NC

Zip Code

28110

FEC ID number of contributing
federal political committee.

C

Name of Employer
Hinson ElectricOccupation
President - Electrician

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		18		2016

Transaction ID : SA11AI.4387

Amount of Each Receipt this Period

250.00

☐ Memo Item
☐ Check

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1050.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 11 OF 35

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Johnson, Todd

Full Name (Last, First, Middle Initial)

Spiro Kaltsounis

Mailing Address 314 Abellia Dr

City

Waxhaw

State

NC

Zip Code

28173

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hill Top Restaurant

Occupation

Restaurant Owner

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		09		2016

Transaction ID : SA11AI.4486

Amount of Each Receipt this Period

1250.00

☐ Memo Item

In-kind - Fundraising expenses

Full Name (Last, First, Middle Initial)

J. Don Kerr

Mailing Address 9614 Joe Kerr Rd

City

Waxhaw

State

NC

Zip Code

28173

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired Farmer

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		18		2016

Transaction ID : SA11AI.4334

Amount of Each Receipt this Period

250.00

☐ Memo Item

Check

Full Name (Last, First, Middle Initial)

J. Don Kerr

Mailing Address 9614 Joe Kerr Rd

City

Waxhaw

State

NC

Zip Code

28173

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired Farmer

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		16		2016

Transaction ID : SA11AI.4336

Amount of Each Receipt this Period

250.00

☐ Memo Item

Check

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1750.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 12 OF 35

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Johnson, Todd

Full Name (Last, First, Middle Initial)

James Kerr

A.

Mailing Address PO Box 783

City

Monroe

State

NC

Zip Code

28111

FEC ID number of contributing
federal political committee.

C

Name of Employer

J Kerr and Company

Occupation

Real estate agent

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		18		2016

Transaction ID : SA11AI.4383

Amount of Each Receipt this Period

250.00

☐ Memo Item
☐ Check

Full Name (Last, First, Middle Initial)

Rosemary Lambert

B.

Mailing Address 1320 Fillmore Ave Apt 120

City

Charlotte

State

NC

Zip Code

28203

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self Employed

Occupation

Accountant

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		18		2016

Transaction ID : SA11AI.4461

Amount of Each Receipt this Period

1000.00

☐ Memo Item
☐ Credit Card

Full Name (Last, First, Middle Initial)

Gay Lookabill

C.

Mailing Address PO Box 1106

City

Wadesboro

State

NC

Zip Code

28170

FEC ID number of contributing
federal political committee.

C

Name of Employer

Ambassador Health

Occupation

Administrator

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		18		2016

Transaction ID : SA11AI.4411

Amount of Each Receipt this Period

250.00

☐ Memo Item
☐ Check

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1500.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 13 OF 35

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Johnson, Todd

Full Name (Last, First, Middle Initial)

A. Lee Roy Lookabill

Mailing Address PO Box 1106

City

Wadesboro

State

NC

Zip Code

28170

FEC ID number of contributing
federal political committee.

C

Name of Employer

Anson Real Estate and Ins

Occupation

Agent

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		18		2016

Transaction ID : SA11AI.4409

Amount of Each Receipt this Period

250.00

☐ Memo Item
☐ Check

Full Name (Last, First, Middle Initial)

B. Michael Lutes

Mailing Address 4025 Camrose Crossing

City

Matthews

State

NC

Zip Code

28104

FEC ID number of contributing
federal political committee.

C

Name of Employer

Carolinas Healthcare System

Occupation

Management

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		11		2016

Transaction ID : SA11AI.4442

Amount of Each Receipt this Period

500.00

☐ Memo Item
☐ Credit Card

Full Name (Last, First, Middle Initial)

C. James Marsh

Mailing Address 1420 Rorie Rd

City

Marshville

State

NC

Zip Code

28103

FEC ID number of contributing
federal political committee.

C

Name of Employer

Farm Bureau

Occupation

Agent

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		02		2016

Transaction ID : SA11AI.4430

Amount of Each Receipt this Period

250.00

☐ Memo Item
☐ Check

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1000.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 14 OF 35

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Johnson, Todd

Full Name (Last, First, Middle Initial)

W. Cliff Martin

A.

Mailing Address PO Box 5

City

Polkton

State

NC

Zip Code

28135

FEC ID number of contributing
federal political committee.

C

Name of Employer

Martin Properties

Occupation

Property Manager

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		18		2016

Transaction ID : SA11AI.4415

Amount of Each Receipt this Period

1000.00

☐ Memo Item
☐ Check

Full Name (Last, First, Middle Initial)

Barbara McBryde

B.

Mailing Address PO Box 28

City

Marshville

State

NC

Zip Code

28103

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired Educator

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		22		2016

Transaction ID : SA11AI.4417

Amount of Each Receipt this Period

500.00

☐ Memo Item
☐ Check

Full Name (Last, First, Middle Initial)

Jimmy Mezzanotte

C.

Mailing Address 1523 Tom Williams Rd

City

Monroe

State

NC

Zip Code

28112

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self Employed

Occupation

Attorney/Farmer

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		09		2016

Transaction ID : SA11AI.4473

Amount of Each Receipt this Period

1250.00

☐ Memo Item
☐ In-kind - Fundraising Expenses

SUBTOTAL of Receipts This Page (optional).....

2750.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 15 OF 35

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Johnson, Todd

Full Name (Last, First, Middle Initial)

Sonya Nunn

A.

Mailing Address 2919 Wolf Pond Rd

City

Monroe

State

NC

Zip Code

28112

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cox Farms

Occupation

Administrative

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		22		2016

Transaction ID : SA11AI.4425

Amount of Each Receipt this Period

2500.00

☐ Memo Item
☐ Check

Full Name (Last, First, Middle Initial)

Patricia Preslar

B.

Mailing Address 4540 secrest Short Cut Rd

City

Monroe

State

NC

Zip Code

28110

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

Homemaker

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		09		2016

Transaction ID : SA11AI.4353

Amount of Each Receipt this Period

500.00

☐ Memo Item
☐ Check

Full Name (Last, First, Middle Initial)

James Riggins

C.

Mailing Address 1692 Green Dolphin Ln

City

Cornelius

State

NC

Zip Code

28031

FEC ID number of contributing
federal political committee.

C

Name of Employer

Technocom

Occupation

President of Business

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		18		2016

Transaction ID : SA11AI.4393

Amount of Each Receipt this Period

250.00

☐ Memo Item
☐ Check

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3250.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 16 OF 35

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Johnson, Todd

Full Name (Last, First, Middle Initial)

Erica Rodgers

Mailing Address 5408 Baywood Dr

City

Waxhaw

State

NC

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Johnson Insurance

Occupation

Agent

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		16		2016

Transaction ID : SA11AI.4339

Amount of Each Receipt this Period

500.00

☐ Memo Item
☐ Check

Full Name (Last, First, Middle Initial)

Jared Sanspree

Mailing Address 3109 Twin Leaf Dr

City

Raleigh

State

NC

Zip Code

27613

FEC ID number of contributing
federal political committee.

C

Name of Employer

Superior Insurance

Occupation

Insurance Agent

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		19		2016

Transaction ID : SA11AI.4460

Amount of Each Receipt this Period

500.00

☐ Memo Item
☐ Credit Card

Full Name (Last, First, Middle Initial)

Kelly Sherwood

Mailing Address 5900 Morgan Park Dr

City

Monroe

State

NC

Zip Code

28110

FEC ID number of contributing
federal political committee.

C

Name of Employer

Palm Beach tan

Occupation

Manager

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		16		2016

Transaction ID : SA11AI.4332

Amount of Each Receipt this Period

300.00

☐ Memo Item
☐ check

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1300.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 17 OF 35

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Johnson, Todd

Full Name (Last, First, Middle Initial)

Nathan Sumner

Mailing Address 2024 Oakstone Dr

City

Monroe

State

NC

Zip Code

28110

FEC ID number of contributing
federal political committee.

C

Name of Employer

The Cigar Nook

Occupation

Sales Representative

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

760.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		16		2016

Transaction ID : SA11AI.4337

Amount of Each Receipt this Period

760.00

☐ Memo Item
☐ Check

Full Name (Last, First, Middle Initial)

Jonathan Thomas

Mailing Address 3204 E Lawyers rd

City

Monroe

State

NC

Zip Code

28110

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pruitt HealthCare

Occupation

Administrator

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		10		2016

Transaction ID : SA11AI.4366

Amount of Each Receipt this Period

1500.00

☐ Memo Item
☐ Check

Full Name (Last, First, Middle Initial)

John Tice

Mailing Address 2701 Rolling Hills Dr

City

Monroe

State

NC

Zip Code

28110

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired real estate Agent

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		18		2016

Transaction ID : SA11AI.4401

Amount of Each Receipt this Period

500.00

☐ Memo Item
☐ Check

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2760.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 18 OF 35

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Johnson, ToddFull Name (Last, First, Middle Initial)
Victoria Viegelmann

Mailing Address 2809 Eagle View Ln

City	State	Zip Code
Monroe	NC	28110

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/AOccupation
Homemaker

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		22		2016

Transaction ID : SA11AI.4419

Amount of Each Receipt this Period

2500.00

☐ Memo Item
☐ Check
Full Name (Last, First, Middle Initial)
RT Wallace

Mailing Address 4006 Wolf Pond Rd

City	State	Zip Code
Monroe	NC	28112

FEC ID number of contributing
federal political committee.

C

Name of Employer
PDQ TechnologiesOccupation
President

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		02		2016

Transaction ID : SA11AI.4432

Amount of Each Receipt this Period

1000.00

☐ Memo Item
☐ Check

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Receipt this Period

☐ Memo Item
SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

3500.00

32410.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 19 OF 35

<input type="checkbox"/> 11a 12	<input checked="" type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
------------------------------------	--	-------------------------------------	------------------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Johnson, ToddFull Name (Last, First, Middle Initial)
TODD JOHNSONMailing Address **PO BOX 591**

City MONROE	State NC	Zip Code 28111
-----------------------	--------------------	--------------------------

FEC ID number of contributing
federal political committee.**C** **H6NC09192**Name of Employer
Johnson InsuranceOccupation
Insurance agent

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 02 / 2016

Transaction ID : SA13A.4316

Amount of Each Receipt this Period

3000.00
☐ Memo Item
☐ Personal Loan
Full Name (Last, First, Middle Initial)
TODD JOHNSONMailing Address **PO BOX 591**

City MONROE	State NC	Zip Code 28111
-----------------------	--------------------	--------------------------

FEC ID number of contributing
federal political committee.**C** **H6NC09192**Name of Employer
Johnson InsuranceOccupation
Insurance agent

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

13000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 16 / 2016

Transaction ID : SA13A.4317

Amount of Each Receipt this Period

10000.00
☐ Memo Item
☐ Personal Loan

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing
federal political committee.**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item
SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....**13000.00****13000.00**

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 20 OF 35

(check only one)

<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
------------------------------------	-------------------------------------	--	------------------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Johnson, Todd

Full Name (Last, First, Middle Initial)

Yadkin Bank

A.

Mailing Address Po Box 888

City

State

Zip Code

Elkin

NC

28621

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016



Primary



General



Other (specify)

Election Cycle-to-Date

70000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		16		2016

Transaction ID : SA13B.4497

Amount of Each Receipt this Period

70000.00

☐ Memo Item

Loan from Yadkin Bank

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:



Primary



General



Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:



Primary



General



Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

70000.00

70000.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 21 OF 35

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Johnson, Todd

Full Name (Last, First, Middle Initial)

A. Zach Almond

Mailing Address 45334 Byrd Rd

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		26		2016

City	State	Zip Code
Albemarle	NC	28001

Amount of Each Disbursement this Period

Purpose of Disbursement
Payroll

001

2000.00

☐ Memo Item

Candidate Name

Johnson, Todd

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: NC

District: 09

Transaction ID : SB17.4279

Full Name (Last, First, Middle Initial)

B. McRae Dowless

Mailing Address PO Box 253

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		04		2016

City	State	Zip Code
Elizabethtown	NC	28337

Amount of Each Disbursement this Period

Purpose of Disbursement
GOTV - 'Get Out The Vote'

007

2156.00

☐ Memo Item

Candidate Name

Johnson, Todd

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: NC

District: 09

Transaction ID : SB17.4294

Full Name (Last, First, Middle Initial)

C. McRae Dowless

Mailing Address PO Box 253

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		03		2016

City	State	Zip Code
Elizabethtown	NC	28337

Amount of Each Disbursement this Period

Purpose of Disbursement
GOTV - 'Get Out The Vote'

007

600.00

☐ Memo Item

Candidate Name

Johnson, Todd

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: NC

District: 09

Transaction ID : SB17.4296

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

4756.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 22 OF 35

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Johnson, Todd

Full Name (Last, First, Middle Initial)

A. McRae Dowless

Mailing Address PO Box 253

City	State	Zip Code
Elizabethtown	NC	28337

Purpose of Disbursement
GOTV - 'Get Out The Vote'

007

Candidate Name

Johnson, Todd

Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify)

State: NC District: 09

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		09		2016

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Transaction ID : SB17.4297

B. Brooke Griffin

Mailing Address 5301 Old Highway Rd

City	State	Zip Code
Waxhaw	NC	28173

Purpose of Disbursement
Advertising

004

Candidate Name

Johnson, Todd

Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify)

State: NC District: 09

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		13		2016

Amount of Each Disbursement this Period

235.00

☐ Memo Item

Transaction ID : SB17.4298

c. Tabitha Joyce

Mailing Address 5224 Ballester St

City	State	Zip Code
Hope Mills	NC	28348

Purpose of Disbursement
GOTV - 'Get Out The Vote'

007

Candidate Name

Johnson, Todd

Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify)

State: NC District: 09

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		04		2016

Amount of Each Disbursement this Period

700.00

☐ Memo Item

Transaction ID : SB17.4282

SUBTOTAL of Disbursements This Page (optional).....

1935.00

TOTAL This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 23 OF 35

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Johnson, Todd

Full Name (Last, First, Middle Initial)

A. Tabitha Joyce

Mailing Address 5224 Ballester St

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		19		2016

City	State	Zip Code
Hope Mills	NC	28348

Amount of Each Disbursement this Period

700.00

Purpose of Disbursement
GOTV - 'Get Out The Vote'

007

☐ Memo Item

Candidate Name

Johnson, Todd

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: NC District: 09

Transaction ID : SB17.4284

Full Name (Last, First, Middle Initial)

B. Spiro Kaltsounis

Mailing Address 314 Abellia Dr

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		09		2016

City	State	Zip Code
Waxhaw	NC	28173

Amount of Each Disbursement this Period

1250.00

Purpose of Disbursement
In-kind - Fundraising expenses

003

☐ Memo Item

Candidate Name

Johnson, Todd

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: NC District: 09

Transaction ID : SB17.4487

Full Name (Last, First, Middle Initial)

c. Georgia Melby

Mailing Address 391 Back Bay

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		19		2016

City	State	Zip Code
Sanford	NC	27330

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
Payroll

001

☐ Memo Item

Candidate Name

Johnson, Todd

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: NC District: 09

Transaction ID : SB17.4273

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

2950.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 24 OF 35

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Johnson, Todd

Full Name (Last, First, Middle Initial)

A. Georgia Melby

Mailing Address 391 Back Bay

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		18		2016

City	State	Zip Code
Sanford	NC	27330

Amount of Each Disbursement this Period

Purpose of Disbursement
Payroll

001

1000.00

☐ Memo Item

Candidate Name

Johnson, Todd

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: NC District: 09

Transaction ID : SB17.4274

Full Name (Last, First, Middle Initial)

B. Jimmy Mezzanotte

Mailing Address 1523 Tom Williams Rd

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		09		2016

City	State	Zip Code
Monroe	NC	28112

Amount of Each Disbursement this Period

Purpose of Disbursement
In-kind - Fundraising Expenses

003

1250.00

☐ Memo Item

Candidate Name

Johnson, Todd

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: NC District: 09

Transaction ID : SB17.4476

Full Name (Last, First, Middle Initial)

C. NC 9th GOP Congressional District

Mailing Address 3011 Salmon River Rd

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		09		2016

City	State	Zip Code
Monroe	NC	28110

Amount of Each Disbursement this Period

Purpose of Disbursement
Sponsorship

011

750.00

☐ Memo Item

Candidate Name

Johnson, Todd

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: NC District: 09

Transaction ID : SB17.4304

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

3000.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 25 OF 35

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Johnson, Todd

Full Name (Last, First, Middle Initial)

A. Ian Newberry

Mailing Address 912 Hosta Valley Ct

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		19		2016

City	State	Zip Code
Wake Forest	NC	27587

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
Payroll

001

☐ Memo Item

Candidate Name

Johnson, Todd

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: NC

District: 09

Transaction ID : SB17.4275

Full Name (Last, First, Middle Initial)

B. Ian Newberry

Mailing Address 912 Hosta Valley Ct

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		09		2016

City	State	Zip Code
Wake Forest	NC	27587

Amount of Each Disbursement this Period

176.58

Purpose of Disbursement
Reimbursement for gas

002

☐ Memo Item

Candidate Name

Johnson, Todd

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: NC

District: 09

Transaction ID : SB17.4276

Full Name (Last, First, Middle Initial)

C. Ian Newberry

Mailing Address 912 Hosta Valley Ct

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		17		2016

City	State	Zip Code
Wake Forest	NC	27587

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
Payroll

001

☐ Memo Item

Candidate Name

Johnson, Todd

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: NC

District: 09

Transaction ID : SB17.4277

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2176.58

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 26 OF 35

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Johnson, Todd

Full Name (Last, First, Middle Initial)

A. New River Research Institute

Mailing Address 2150 Country Club Rd Ste 221

City	State	Zip Code
Winston Salem	NC	27104

Purpose of Disbursement
Software Rental

001

Category/
Type

Candidate Name

Johnson, Todd

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: NC District: 09

Date of Disbursement

M M / D D / Y Y Y Y
04 / 26 / 2016

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Transaction ID : SB17.4314

B. Sign MastersMailing Address 314 Depot St
Suite B

City	State	Zip Code
Monroe	NC	28112

Purpose of Disbursement
Campaign Signs

004

Category/
Type

Candidate Name

Johnson, Todd

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: NC District: 09

Date of Disbursement

M M / D D / Y Y Y Y
04 / 08 / 2016

Amount of Each Disbursement this Period

5230.75

☐ Memo Item

Transaction ID : SB17.4285

c. Sign MastersMailing Address 314 Depot St
Suite B

City	State	Zip Code
Monroe	NC	28112

Purpose of Disbursement
Campaign Signs

004

Category/
Type

Candidate Name

Johnson, Todd

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: NC District: 09

Date of Disbursement

M M / D D / Y Y Y Y
04 / 27 / 2016

Amount of Each Disbursement this Period

2501.15

☐ Memo Item

Transaction ID : SB17.4287

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

8231.90

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 27 OF 35

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Johnson, Todd

Full Name (Last, First, Middle Initial)

A. James Singletary

Mailing Address 216 Webb Faulk Rd

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		03		2016

City	State	Zip Code
Bladenboro	NC	28320

Amount of Each Disbursement this Period

1800.00

Purpose of Disbursement
GOTV - 'Get Out The Vote'

007

☐ Memo Item

Candidate Name

Johnson, Todd

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: NC

District: 09

Transaction ID : SB17.4307

Full Name (Last, First, Middle Initial)

B. SoundTrax

Mailing Address 302 Jefferson St Ste 260

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		10		2016

City	State	Zip Code
Raleigh	NC	27605

Amount of Each Disbursement this Period

1292.00

Purpose of Disbursement
Advertising

004

☐ Memo Item

Candidate Name

Johnson, Todd

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: NC

District: 09

Transaction ID : SB17.4305

Full Name (Last, First, Middle Initial)

C. Statewide Survey Research

Mailing Address 300 Pearl St Ste 600 Olympic Tower

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		14		2016

City	State	Zip Code
Buffalo	NY	14202

Amount of Each Disbursement this Period

6600.00

Purpose of Disbursement
Polling

005

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Transaction ID : SB17.4300

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

9692.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 28 OF 35

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Johnson, Todd

Full Name (Last, First, Middle Initial)

A. Bryson Taylor

Mailing Address 13609 Krislyn Woods PI

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		20		2016

City	State	Zip Code
Charlotte	NC	28278

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
Payroll

001

☐ Memo Item

Candidate Name

Johnson, Todd

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: NC District: 09

Transaction ID : SB17.4280

Full Name (Last, First, Middle Initial)

B. Bryson Taylor

Mailing Address 13609 Krislyn Woods PI

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		17		2016

City	State	Zip Code
Charlotte	NC	28278

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
Payroll

001

☐ Memo Item

Candidate Name

Johnson, Todd

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: NC District: 09

Transaction ID : SB17.4281

Full Name (Last, First, Middle Initial)

c. Zach Almond Consulting

Mailing Address 45334 Byrd Rd

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		22		2016

City	State	Zip Code
Albemarle	NC	28001

Amount of Each Disbursement this Period

8011.50

Purpose of Disbursement
Advertising Consulting

004

☐ Memo Item

Candidate Name

Johnson, Todd

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: NC District: 09

Transaction ID : SB17.4288

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

10011.50

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 29 OF 35

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Johnson, Todd

Full Name (Last, First, Middle Initial)

A. Zach Almond Consulting

Mailing Address 45334 Byrd Rd

City	State	Zip Code
Albemarle	NC	28001

Purpose of Disbursement
Advertising Consulting

004

Candidate Name

Johnson, Todd

Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify)

State: NC District: 09

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		02		2016

Amount of Each Disbursement this Period

2449.34

☐ Memo Item

Transaction ID : SB17.4290

Full Name (Last, First, Middle Initial)

B. Zach Almond Consulting

Mailing Address 45334 Byrd Rd

City	State	Zip Code
Albemarle	NC	28001

Purpose of Disbursement
Advertising Consulting

004

Candidate Name

Johnson, Todd

Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify)

State: NC District: 09

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		04		2016

Amount of Each Disbursement this Period

9431.82

☐ Memo Item

Transaction ID : SB17.4291

Full Name (Last, First, Middle Initial)

c. Zach Almond Consulting

Mailing Address 45334 Byrd Rd

City	State	Zip Code
Albemarle	NC	28001

Purpose of Disbursement
Advertising Consulting

004

Candidate Name

Johnson, Todd

Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify)

State: NC District: 09

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		09		2016

Amount of Each Disbursement this Period

9214.54

☐ Memo Item

Transaction ID : SB17.4292

SUBTOTAL of Disbursements This Page (optional).....

21095.70

TOTAL This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 30 OF 35

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Johnson, Todd

Full Name (Last, First, Middle Initial)

A. Zach Almond Consulting

Mailing Address 45334 Byrd Rd

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		17		2016

City	State	Zip Code
Albemarle	NC	28001

Amount of Each Disbursement this Period

18411.28

Purpose of Disbursement
Advertising Consulting

004

Category/
Type☐ Memo Item

Transaction ID : SB17.4293

Candidate Name

Johnson, Todd

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: NC

District: 09

Full Name (Last, First, Middle Initial)

B.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City	State	Zip Code

Amount of Each Disbursement this Period

--

Purpose of Disbursement

Category/
Type☐ Memo Item

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

C.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City	State	Zip Code

Amount of Each Disbursement this Period

--

Purpose of Disbursement

Category/
Type☐ Memo Item

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

18411.28

82259.96

SCHEDULE C (FEC Form 3)
LOANS

PAGE 31 OF 35

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4252

Johnson, Todd

LOAN SOURCE Full Name (Last, First, Middle Initial) **PERSONAL FUNDS** ☐ Memo Item

Todd Johnson

Election: 2016

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

City

State

ZIP Code

Original Amount of Loan

100.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

100.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
03 / 01 / 2016

Date Due

M M / D D / Y Y Y Y

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

100.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 32 OF 35

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4253

Johnson, Todd

LOAN SOURCE Full Name (Last, First, Middle Initial) **PERSONAL FUNDS** ☐ Memo Item

Todd Johnson

Election: 2016

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

City

State

ZIP Code

Original Amount of Loan

7000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

7000.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
03 / 14 / 2016

Date Due

M M / D D / Y Y Y Y

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

7000.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 33 OF 35

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4316

Johnson, Todd

LOAN SOURCE Full Name (Last, First, Middle Initial) **PERSONAL FUNDS** ☐ Memo Item

TODD JOHNSON

Election: 2016

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
PO BOX 591

City

State

ZIP Code

MONROE

NC

28111

Original Amount of Loan

3000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

3000.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
05 / 02 / 2016

Date Due

M M / D D / Y Y Y Y

Interest Rate

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

3000.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 34 OF 35

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4317

Johnson, Todd

LOAN SOURCE Full Name (Last, First, Middle Initial) **PERSONAL FUNDS** ☐ Memo Item

TODD JOHNSON

Election: 2016

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
PO BOX 591

City

State

ZIP Code

MONROE

NC

28111

Original Amount of Loan

10000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

10000.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
05 / 16 / 2016

Date Due

M M / D D / Y Y Y Y

Interest Rate

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

10000.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 35 OF 35

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☐ 13a
☒ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4497

Johnson, Todd

LOAN SOURCE Full Name (Last, First, Middle Initial)

☐ Memo Item

Yadkin Bank

Election: 2016

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
Po Box 888

City

State

ZIP Code

Elkin

NC

28621

Original Amount of Loan

70000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

70000.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
05 / 16 / 2016

Date Due

M M / D D / Y Y Y Y

Interest Rate

4.50

% (apr)

Secured:

☒ Yes☐ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

70000.00

TOTALS This Period (last page in this line only)..... ►

90100.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.